



NEW JERSEY STATE DEPARTMENT OF EDUCATION
Office of Specialized Populations
Comprehensive Equity Plan FY 2004-2007

SCHOOL DISTRICT/CHARTER SCHOOL CEP REVISION FORM

DISTRICT/CHARTER NAME:	COUNTY NAME:
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Please Note: Items checked (✓) are missing or incomplete

<u>Section I. General Documents Submitted</u>	
1. District/Charter School Information, including name, address, telephone numbers, and AAO email address	
2. Statement of Assurances signed by CSA	
3. Board of Ed resolution appointing the AAO	
4. Board of Ed resolution authorizing the AAT to conduct a needs assessment and to develop the CEP	
5. Board of Ed resolution authorizing the submission of the proposed CEP	
6. Affirmative Action Team Membership Form that lists Affirmative Action Team members	
7. District/charter school needs assessment checklist (Appendix A)	
8. Comprehensive equity plan forms – the following are missing or incomplete:	

<u>Section II. Needs Assessment Checklist Components; Items checked (✓) are missing or incomplete; items needing revision are listed by section.</u>	
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A. Board Responsibility	
B. School and Classroom Practices	
C. Employment and Contract Practices	

Section III. CEP Plan Components – Items needing revision are listed by section as follows:	
A. Board Responsibilities	
B. Staff Development	
C. School and Classroom Practices	
	1. Equality and Equity in Curriculum
	2. Equality and Equity in Student Access
	3. Equality and Equity in Guidance Program Services
	4. Equality and Equity in Physical Education & Athletics Programs
D. Employment and Contract Practices	
<u>OTHER</u>	
<u>COMMENTS</u>	
	Return to County Office with revisions by:
County Education Specialist Name	
County Education Specialist Signature	